

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 117

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Free and Strong America PAC, Inc.

A.

Full Name (Last, First, Middle Initial)

MR. A. L. ABERCROMBIE

Mailing Address 1440 N. GATEWOOD STREET

City

WICHITA

State

KS

Zip Code

67206-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 8

Transaction ID: SA11.324195

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ANNA M. ARNOLD

Mailing Address 34 DARIEN ROAD
COVERED BRIDGE FARMS

City

NEWARK

State

DE

Zip Code

19711-2024

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 6 / 2 0 0 8

Transaction ID: SA11.325698

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CAESAR A. ARREDONDO

Mailing Address MEAD POINT

City

GREENWICH

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARREDONDO & COMPANY, L.L.-
C.Occupation
REAL ESTATE OWNER/BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 0 8

Transaction ID: SA11.323888

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)